

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):		FILED JUN 12 2023 CLERK, U.S. DISTRICT COURT NORTHERN DISTRICT OF OHIO CLEVELAND
TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____		
COUNTY OF CUYAHOGA STREET ADDRESS: _____ MAILING ADDRESS: P.O. BOX 91391 CITY AND ZIP CODE: CLEVELAND OHIO 44101 BRANCH NAME: _____		
PLAINTIFF/PETITIONER:		CASE NUMBER:
DEFENDANT/RESPONDENT:		JUDICIAL OFFICER:
NOTICE OF CHANGE OF ADDRESS OR OTHER CONTACT INFORMATION		DEPT.:

1. Please take notice that, as of (date):

- ☒ the following self-represented party or
- ☐ the attorney for:
- a. ☒ plaintiff (name):
 - b. ☐ defendant (name):
 - c. ☐ petitioner (name):
 - d. ☐ respondent (name):
 - e. ☐ other (describe):

has changed his or her address for service of notices and documents or other contact information in the above-captioned action.

☐ A list of additional parties represented is provided in Attachment 1.

2. The new address or other contact information for (name):

is as follows:

- a. Street:
- b. City:
- c. Mailing address (if different from above): **P.O. BOX 91391**
- d. State and zip code: **CLEVELAND OHIO 44101**
- e. Telephone number: **336-588-5782**
- f. Fax number (if available):
- g. E-mail address (if available): **yellowblack1952@gmail.com**

3. All notices and documents regarding the action should be sent to the above address.

Date:

6/12 2023

PATRICIA JOHNSON

(TYPE OR PRINT NAME)

Patricia Johnson Pro Se

(SIGNATURE OF PARTY OR ATTORNEY)